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7590 09/03/2004

Peter Gibson
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6320 Greenspring Avenue
Baltimore, MD 21209

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11/27/2009 CCHAU2 00000069 10720474

02 FC:2501
03 FC:1504

755.00 OP
300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/720,474

11/25/2003

Robert De Nise

4382

TITLE OF INVENTION: TOILET VENTILATION SYSTEM

Refund Ref:
11/27/2009 CCHAU2 0000169518 ALE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	12/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
FETSUGA, ROBERT M	3751	004-213000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1	_____
2	_____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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